

**ADULT DENTAL PLAN
General Dentist**

High Freq. Code	Code	Description	100%	20%	30%	40%	50%
DIAGNOSTIC SECTION							
EXAMINATIONS							
85501		Limited oral (new patient)	42.05	8.41	12.62	16.82	21.03
85503		Emergency (Remarks Code required)	50.93	10.19	15.28	20.37	25.47
RADIOGRAPHS							
Bitewing							
85507		- One (see Preamble)	20.23	4.05	6.07	8.09	10.12
85509		- Two (see Preamble)	26.51	5.30	7.95	10.60	13.26
Periapical							
85511		- One (Remarks Code required)	20.23	4.05	6.07	8.09	10.12
85512		- Two (Remarks Code required)	26.51	5.30	7.95	10.60	13.26
Panoramic							
85513		One (Restricted to Oral Surgeon) (Remarks Code required)					
RESTORATIVE SECTION							
85514		Removal of carious lesion or existing restoration and the placement of sedative/protective dressing when not done the same day or within 42 days of the subsequent final restoration.	93.93	18.79	28.18	37.57	46.97
DENTAL RESTORATIONS							
Primary Canine and Molar Teeth							
85515		- One surface	88.93	17.79	26.68	35.57	44.47
85517		- Two surfaces	130.23	26.05	39.07	52.09	65.12
85519		- Three surfaces	151.52	30.30	45.46	60.61	75.76
85521		- Four surfaces	183.67	36.73	55.10	73.47	91.84
Permanent Anteriors and Premolars							
85523		- One surface	117.05	23.41	35.12	46.82	58.53
85525		- Two surfaces	156.68	31.34	47.00	62.67	78.34
85527		- Three surfaces	180.95	36.19	54.29	72.38	90.48
85529		- Four surfaces	234.41	46.88	70.32	93.76	117.21
Permanent Molars – Amalgam Fillings							
85531		- One surface	97.07	19.41	29.12	38.83	48.54
85533		- Two surfaces	133.34	26.67	40.00	53.34	66.67
85535		- Three surfaces	177.90	35.58	53.37	71.16	88.95
85537		- Four surfaces	210.87	42.17	63.26	84.35	105.44
85539		- Five surfaces	247.54	49.51	74.26	99.02	123.77

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Permanent Molars – Tooth Colored Bonded Fillings							
	85541	- One surface	134.89	26.98	40.47	53.96	67.45
	85543	- Two surfaces	190.37	38.07	57.11	76.15	95.19
	85545	- Three surfaces	237.36	47.47	71.21	94.94	118.68
	85547	- Four surfaces	287.30	57.46	86.19	114.92	143.65
	85549	- Five surfaces	311.13	66.23	99.34	132.45	165.57
Retentive Pins							
	85551	- One pin	24.64	4.93	7.39	9.86	12.32
	85553	- Two or more pins	38.91	7.78	11.67	15.56	19.46
ORAL SURGERY SECTION							
REMOVALS							
	85555	Single tooth removal, uncomplicated	106.45	21.29	31.94	42.58	53.23
	85557	Each additional tooth removed in the same quadrant	76.04	15.21	22.81	30.42	38.02
	85559	Odontectomy, surgical approach, requiring surgical flap. removal of bone and/or sectioning of tooth. (Except for third molar impactions, in which case the Surgical Dental Schedule should be used, noting the applicable restrictions).	207.59	41.52	62.28	83.04	103.80

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PROSTHODONTICS REMOVABLE							
DENTIST:							
Complete Dentures, Standard							
85561		Denture: complete, upper Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85562		Denture: complete, lower Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85564		Denture complete reline, upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85565		Denture complete reline, lower Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85566		Denture immediate post extraction Insertion including laboratory fees	532.00	106.40	159.60	212.80	266.00
85567		Repairs - \$42/15 minutes to maximum of \$128 including laboratory fees – per denture					
Partial Dentures							
85568		Denture: partial – upper Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85569		Denture: partial – lower Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85570		Denture: partial reline – upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85571		Denture: partial reline – lower Including laboratory fees ...	211.00	42.20	63.30	84.40	105.50
85572		Repairs - \$42/15 minutes to maximum of \$128 including laboratory fees – per denture					
DENTURIST							
Complete Dentures, Standard							
85573		Denture: complete, upper Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85574		Denture: complete, lower Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85576		Denture: complete, reline, upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85577		Denture complete, reline – lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85578		Repairs - \$42/15 minutes to maximum of \$98 including laboratory fees					
Partial Dentures							
85579		Denture: partial – upper Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85580		Denture: partial – lower Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85581		Denture: partial reline – upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85582		Denture: partial reline – lower Including laboratory fees ...	211.00	42.20	63.30	84.40	105.50
85583		Repairs - \$42/15 minutes to maximum of \$98 including laboratory fees.					